

# Work Order ID 107403

September-23-13 11:50:07 AM

**\*107403\***

Page 1

Item ID: D4063-3

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Hose

Start Date: 9/23/13 Start Qty: 4.00

**\*4\***

Cust Item ID:

Required Date: 9/23/13 Req'd Qty: 4.00

**\*4\***

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 13-09-24 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D4063	a

100 0.00

**\*100\***

Purchasing

Purchasing

Memo

Issue P/O: 21526  
Purchase part as per Dwg D4063  
Part #: 193-8  
\*\*\*ATTN: ORDER IN UNITS-  
EX. IF W/O IS FOR 6 INDICATE ON PO  
6 PCS OF 24" \*\*\*\*\*  
Possible Supplier: Stratoflex  
Material release note required

0.00

CD 13/09/30 4 = 884

110

Receive & Inspect for Damage & Mat'l Certs 0.00

**\*110\***

Packaging

Packaging

Memo

0.00

12/3/10/12 9/11/10

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
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<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	
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# Work Order ID 107403

September-23-13 11:50:07 AM

**\*107403\***

Page 2

Item ID: D4063-3 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Hose  
 Start Date: 9/23/13 Start Qty: 4.00 **\*4\*** Cust Item ID:  
 Required Date: 9/23/13 Req'd Qty: 4.00 **\*4\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
115		0.00							
<b>*115*</b>						4			FF
Small Fab	Memo	0.00							13-10-11
Small Fab	CUT TO LENGHT AS PER DWG								
117		0.00							
<b>*117*</b>						4			
QC	Memo	0.00							
Quality Control									
120		0.00							
<b>*120*</b>						4			
QC	Memo	0.00							
Quality Control									

DAS  
27  
9-89

B 10 9

DAS  
27  
9-89  
B 10 9

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
<b>Landing Gear</b>			<b>General</b>						
<input type="checkbox"/>	Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced
<input type="checkbox"/>	Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure
<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld
<input type="checkbox"/>	Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled
<input type="checkbox"/>	Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved		
<input type="checkbox"/>	Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong		
<input type="checkbox"/>	Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>	Other
<input type="checkbox"/>	Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset				
<input type="checkbox"/>	Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration				
<input type="checkbox"/>	Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence				
<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions				

# Work Order ID 107403

\*107403\*

Page 3

September-23-13 11:50:07 AM

Item ID: D4063-3

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Hose

Start Date: 9/23/13

Start Qty: 4.00

\*4\*

Cust Item ID:

Required Date: 9/23/13

Req'd Qty: 4.00

\*4\*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start \*NR1\*

Stop \*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

Identify as per dwg & Stock Location: ST 251B

0.00

\*130\*

Packaging

Memo

0.00

Packaging

140

QC21- Final Inspection - Work Order Release

0.00

\*140\*

QC

Memo

0.00

Quality Control

*[Signature]* Rm 13/10/10  
ME 13-10-10

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Picklist Print

September-23-13 11:50:07 AM

Page 1 / 1

Work Order ID: 107403

Parent Item: D4063-3

Parent Item Name: Hose

Start Date: 9/23/13

Required Date: 9/23/13

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP rev A 10.02.03 new issue Prelim EC verified by: DD IPP Rev:B 10.05.17 as per ECN10-562 DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
193-8 Stratoflex		Purchased	No				Each	0.0000		4		9/23/13	g/ecs

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

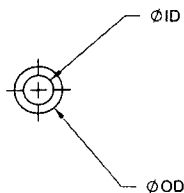
**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other



DART AEROSPACE PART NUMBER	JOHN CAMERON AVIATION PART NUMBER
D4063-1	193-6
D4063-3	193-8

## SPECIFICATION CONTROL DRAWING



107403 MLJ  
13-09-24

DART PART NUMBER	POSSIBLE SUPPLIER	SUPPLIER PART NUMBER	MATERIAL	MATERIAL SPEC	LENGTH	INSIDE $\phi$ NOMINAL "ID"	OUTSIDE $\phi$ NOMINAL "OD"
D4063-1	AVIALL	193-6	SEAMLESS BUNA-N	MIL-H-5593	17.0	0.38	0.60
D4063-3	AVIALL	193-8	SEAMLESS BUNA-N	MIL-H-5593	24.0	0.50	0.75

### D4063-X VENT HOSE

**RELEASED**  
2010-05-05

- NOTES:**
- 1) MATERIAL: SEE TABLE
  - 2) FINISH: N/A
  - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
  - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
  - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
  - 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D4063-1/-3" AND B/N USING WHITE FINE POINT PERMANENT INK MARKER
  - 7) WEIGHT: 0.11 lbs

A	NEW ISSUE	BY <i>[Signature]</i>	10.02.05
REV.	DESCRIPTION	DATE	
DESIGN			
DRAWN	<i>[Signature]</i>		
CHECKED	<i>[Signature]</i>		
MFG. APPR.	<i>[Signature]</i>		
APPROVED	<i>[Signature]</i>		
DE APPR.	<i>[Signature]</i>		
DATE	10.02.05		

**DART AEROSPACE LTD**  
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D4063** REV. A  
SHEET 1 OF 1

TITLE **VENT HOSE** SCALE NTS

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## PACKING LIST



PAGE: 1

DATE: 10/07/13

TIME/HEURE: 09:28

EMP#: 23370

ORDER TYPE / TYPE DE COMMANDE: RG.

CURRENCY: USD

CUSTOMER P.O.: PO21526  
BON DE COMMANDE  
ORDER NUMBER: 0001243297- 357679  
No DE COMMANDE  
ORDER DATE: 10/01/13  
DATE DE COMMANDE

S  
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T  
O

032027  
DART AEROSPACE LTD  
1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
CANADA

S  
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A

DART AEROSPACE LTD  
1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
CANADA

SHIP VIA: FED P1AM - COLLECT  
EXPEDIER PAR

34170  
SE  
H  
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P  
P  
E  
D  
I  
E  
R  
T  
O  
A  
AVIALL TORONTO CSC  
1840 ALSTEP DR. UNIT 5.  
MISSISSAUGA ON L5S 1W1  
CANADA

LINE	MFG	ITEM DESCRIPTION	ORDER QUANTITY QUANTITE COMMANDE	SHIP QUANTITY QUANTITE EXPEDIEE	BACK ORDER COMM. EN SOUF	UOM	LIST PRICE	CUSTOMER PRICE	EXTENDED CUSTOMER PRICE
------	-----	---------------------	--	---------------------------------------	-----------------------------	-----	------------	----------------	----------------------------

PLEASE SHIP FEDEX P1 ON CUSTOMER ACCOUNT  
NUMBER 1517-9324-0, AWB# MUST REFERENCE  
THE PURCHASE ORDER NUMBER, SHIP TO THE  
ATTN OF CHANTAL 613-632-9577

\*\*\*HOSE 193-8 ONE CONTINUOUS LENGTH.

1	10	193-8	8	7		0 FT	8.90	5.2100	36.47
HOSE: LOW PRESSURE, RUBBER									
Schedule B: 4009.31.0000									
LOT 0913122643 IN			84						
Country of Origin: U.S.A.									

ECCN: 9A991.d

PARTS TOTAL	36.47
AOC TOTAL	0.00
TAXES	4.74
FREIGHT	0.00
FUEL SURCHARGE	0.00
ESTIMATED TOTAL	41.21
Currency: United States Dollar	

## CERTIFICATE OF CONFORMANCE / CERTIFICAT DE CONFORMITE

I hereby certify that the aircraft parts, appliances and/or aircraft materials described hereon were acquired from a source of supply that is consistent with the conditions under which the department of transport distributor approval number 35-86 has been granted.  
Je certifie par la presente que les pieces appareils et/ou materiaux d'avions decrits ci-dessus ont ete acquis d'une source d'approvisionnement consistante avec les conditions sous lesquelles l'approbation du distributeur du departement du transport no. 35-86 ont ete recue.

Signed

Rick Rantz, Manager

Date

10/07/13

DISCOUNT TERMS APPLY ONLY TO SUB TOTAL.  
ESCOMPTE APPLIQUES SUR SOUS TOTAL SEULEMENT.  
ALL RETURNED MERCHANDISE SUBJECT TO A HANDLING FEE.  
FRAIS DE MANUTENTION APPLIQUES SUR TOUTE MARCHANDISE  
RETOURNEE.

CUSTOMER COPY / FILE COPY

AV19 R2-99 G.S.T.REG.NO.R121506208



## PACKING LIST



PAGE: 1

DATE: 10/07/13

TIME/HEURE: 10:58

EMP#: 23370

ORDER TYPE / TYPE DE COMMANDE: RG

CURRENCY: USD

CUSTOMER P.O.: P021526  
BON DE COMMANDE  
ORDER NUMBER: 0001243297- 357744  
No DE COMMANDE  
ORDER DATE: 10/01/13  
DATE DE COMMANDE

SHIP NBR: 357744  
No DE EXPEDITEUR

SHIP VIA: FED PLAM - COLLECT  
EXPEDIER PAR

S O V E  
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032027  
DART AEROSPACE LTD  
1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
CANADA

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A  
DART AEROSPACE LTD  
1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
CANADA

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P D  
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A  
34170  
AVIAL TORONTO CSC  
1840 ALSTEP DR. UNIT 5.  
MISSISSAUGA ON L5S 1W1  
CANADA

LINE	MFG	ITEM DESCRIPTION	ORDER QUANTITY QUANTITE COMMANDE	SHIP QUANTITY QUANTITE EXPEDIEE	BACK ORDER COMM. EN SOUF	UOM	LIST PRICE	CUSTOMER PRICE	EXTENDED CUSTOMER PRICE
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PLEASE SHIP FEDEX P1 ON CUSTOMER ACCOUNT  
NUMBER 1517-9324-0, AWB# MUST REFERENCE  
THE PURCHASE ORDER NUMBER, SHIP TO THE  
ATTN OF CHANTAL 613-632-9577

\*\*\*HOSE 193-8 ONE CONTINUOUS LENGTH.

1	10	193-8 HOSE: LOW PRESSURE, RUBBER Schedule B: 4009.31.0000 LOT 0913122643 IN Country of Origin: U.S.A.	8	1		0 FT	8.90	5.2100	5.21
9	28	AN6-26 BOLT: HEX HD, ST DRILLED SHANK Schedule B: 7318.15.2000 LOT 0913071381 EA Country of Origin: U.S.A.	25	25		0 EA	3.89	1.5600	39.00
10	28	AN6-36A BOLT: HEX HD, ST UNDRILLED SHANK	50	50		0 EA	4.61	1.8400	92.00

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Je certifie par la presente que les pieces appareils et/ou materiaux d'avions decrits ci-dessus ont ete acquis d'une source d'approvisionnement consistante avec les conditions sous lesquelles l'approbation du distributeur du departement du transport no. 35-86 ont ete recues.

AV19 R2-99 G.S.T.REG.NO.R121506208

Signed

Rick Rantz, Manager

Date

10/07/13

DISCOUNT TERMS APPLY ONLY TO SUB TOTAL.  
ESCOMPTE APPLIQUES SUR SOUS TOTAL SEULEMENT.  
ALL RETURNED MERCHANDISE SUBJECT TO A HANDLING FEE.  
FRAIS DE MANUTENTION APPLIQUES SUR TOUTE MARCHANDISE  
RETOURNEE.

CUSTOMER COPY / FILE COPY



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

# PURCHASE ORDER

Purchase Order ID PO21526

Purchase Order Date 9/30/2013  
PO Print Date 9/30/2013

Page Number 1 of 4

Order From :

AVIALL  
PO BOX 842275

DALLAS, TX 75284-2275  
USA

VU-AVI003

Ship To : DART AEROSPACE LTD  
1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

FAKED  
08/30/13

Contact Name

Vendor Phone

905-676-1695

Ship To Contact

Ship To Phone

Ship Via:

Ship Acct:

FedEx PI collect

Buyer

Customer POID

Customer Tax #

Terms

Currency

FOB

Chantal Lavoie

10127-2607

Net 30

USD

FCA - (Free Carrier)

M 127070

Ship Acct:						PO Unit Price	Extended Price
Line Nbr	Reference	Description/ Mfg ID	Req Date/ Taxable	CD	Req Qty/ Unit of Measure		
Line Comments			Promise Date				
Delivery Comments							
1	193-8	Stratoflex	10/2/2013		4.00	\$10.42	\$41.68
			Yes		Each		
			10/2/2013				

AS PER DWG D4063 REV.A  
B107403  
NOTE: REQUIRED 4 PCS OF 24" = 8 FT

Me 8 FF

Line Total: \$41.68

2	156001-3S-0185	Hose Assembly	10/2/2013		2.00	\$131.80	\$263.60
			Yes		Each		
			10/2/2013				

AS PER DWG D4002 REV.D  
B107311

1/13/11

Line Total: \$263.60

Note:

9/30/2013